



DOMAIN NAME REQUEST FORM

For domain names that follow the Domain Name Standard

Organization Name: _____ DDS: _____-_____-_____

Requestor Name: _____

Requested DNS: _____ .delaware.gov

IP Address to resolve Domain Name to: _____.

Comments:

Signatures:

Organization IRM Date: _____

Organization Secretary Date: _____

(Required only if request is non-compliant
with the Domain Name Standard)

GIC Date: _____

DTI Date: _____

CIO Date: _____

(Required only if Domain Name is non-compliant
and if it is in the .gov domain.)

When signed by the proper Organization personnel; forward this form for processing, to:

Greg Hughes GIC 121 Duke of York Street
State Archives Building
Dover, DE 19901 SLC D575B
Voice: (302) 744-5072 FAX: (302) 739-1209
greg.hughes@state.de.us

For domain names that do not follow the Domain Name Standard

http://extranet.dti.state.de.us/dtie_standards.shtml

Please file a DNS Waiver Request found at:

http://extranet.dti.state.de.us/dtie_standards.shtml
